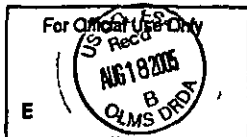


FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved
Office of Management
and Budget
No. 1215-0188
Expires 11-30-2006

This report is mandatory under P L. 86-257 as amended Failure to comply may result in criminal prosecution fines, or civil penalties as provided by 29 U S C 439 or 440



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

1 File Number U <u>9632</u>	2 Fiscal Year Covered From <u>01</u> / <u>01</u> / <u>2004</u> Through <u>12</u> / <u>31</u> / <u>2004</u>
3 Name and address of person filing Name <u>JAMES</u> <u>VETRANO</u> P O Box Bldg Room No if any Street <u>11 ARGYLE TERRACE</u> City <u>YONKERS</u> State <u>NEW YORK</u> ZIP Code + 4 <u>10701</u>	4 Name file number and address of labor organization Name <u>LOCAL 305 RWDSU - UFCW</u> Labor Organization File Number <u>011-053</u> P O Box Building and Room Number if any Street <u>120 SAW MILL RIVER ROAD</u> City <u>HASTINGS-ON-HUDSON</u> State <u>NEW YORK</u> ZIP Code + 4 <u>10706</u>
5 Position in labor organization	

Enter appropriate data below if during the past fiscal year you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions)

A. Held an interest in engaged in transactions (including loans) with or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6 Name and address of Employer (including trade name if any) Name Trade Name if any P O Box Bldg Room No if any Street City State ZIP Code + 4	7 a. Nature of Interest, Transaction or Income. 7 b. Amount.

Signature

15 Signature and verification The undersigned declares under penalty of Perjury and other applicable penalties of the law that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is to the best of the undersigned's knowledge and belief true correct, and complete (See the section on penalties in the instructions)	
Signed <u>James Vetrano</u>	On <u>8-12-05</u> Date <u>914-968-6367</u> Telephone Number

Name of Person Filing	JAMES VETRANO	File Number U-
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B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name if any) Name LOCAL 305 Trade Name if any P O Box Bldg Room No if any Street 120 SAN MILL RIVER ROAD City HASTINGS-ON-HUDSON State NEW YORK ZIP Code + 4 10706	9 Business deals with <input type="checkbox"/> a Labor Organization <input checked="" type="checkbox"/> b Trust <input type="checkbox"/> c Employer
10 If 9 b or 9 c is checked give trust or employer's name Name LOCAL 305 CIO'S PENSION FUND Trade Name if any P O Box Bldg Room No if any Street 120 SAN MILL RIVER ROAD City HASTINGS-ON-HUDSON State NEW YORK ZIP Code + 4 10706	11 a Nature of such dealing Lunch AFTER TRUSTEE'S MEETING ON 11/14/04 11 b Approximate dollar value of such dealing \$ 40 00 12 a Nature of interest held or income received 12 b Amount.

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value	
13 a Name and address of Employer or Labor Relations Consultant (including trade name if any). Name Trade Name if any P O Box Bldg Room No if any Street City State ZIP Code + 4	14 a Nature of payment. 14 b Amount of payment.
13 b Is the Business an Employer <input type="checkbox"/> or Consultant <input type="checkbox"/> ?	

File Number U-

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

12.b. Amount.

Page 2 of 2

Name of Person Filing	JAMES VETRANO	File Number U-
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B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name if any)

Name LOCAL 305

Trade Name if any

P O Box Bldg Room No if any

Street 120 SAW MILL RIVER ROAD

City HASTINGS-ON-HUDSON

State NEW YORK ZIP Code + 4 10706

9 Business deals with

☐ a Labor Organization

☒ b Trust

☐ c Employer

10 If 9 b or 9 c is checked give trust or employer's name

Name LOCAL 305 CIO'S PENSION FUND

Trade Name if any

P O Box Bldg Room No if any

Street 120 SAW MILL RIVER ROAD

City HASTINGS-ON-HUDSON

State NEW YORK ZIP Code + 4 10706

11 a Nature of such dealing

LUNCH AFTER TRUSTEE'S MEETING
ON 7/14/04

11 b Approximate dollar value of such dealing

\$ 21 00

12 a Nature of interest held or income received

12 b Amount

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)

Name

Trade Name if any

P O Box Bldg Room No if any

Street

City

State ZIP Code + 4

14 a Nature of payment

13 b Is the Business an Employer ☐ or Consultant ☐ ?

14 b Amount of payment

Name of Person Filing	JAMES VETRANO	File Number U-
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B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name if any)

Name LOCAL 305
Trade Name If any
P O Box Bldg Room No If any
Street 120 SAW MILL RIVER ROAD
City HASTINGS-ON-HUDSON
State NEW YORK ZIP Code + 4 10706

9 Business deals with

- ☐ a Labor Organization
☒ b Trust
☐ c Employer

10 If 9 b or 9 c is checked give trust or employer's name

Name LOCAL 305 CIO'S PENSION FUND
Trade Name If any
P O Box Bldg Room No If any
Street 120 SAW MILL RIVER ROAD
City HASTINGS-ON-HUDSON
State NEW YORK ZIP Code + 4 10706

11 a Nature of such dealing

LUNCH AFTER TRUSTEE'S MEETING
ON 10/20/04

11 b Approximate dollar value of such dealing

\$ 37.00

12 a. Nature of interest held or income received

12 b. Amount.

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)

Name
Trade Name If any
P O Box Bldg Room No If any
Street
City
State ZIP Code + 4

14 a Nature of payment.

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13 b Is the Business an Employer ☐ or Consultant ☐ ?

14 b Amount of payment.